

AFAF

Continued from Page 3

and retired Air Force people and their families, including surviving spouses and their families.

The organizations are:

— The Air Force Aid Society, the official charity of the Air Force. Airmen can access AFAS worldwide for emergency financial assistance. The top priority is assistance to active-duty members and their families, but consideration is given to assisting retirees and widows on a limited, case-by-case basis. Air Force Reserve and Air National Guard members on extended active duty, under Title 10 U.S.C., are also eligible for emergency assistance when circumstances warrant. The AFAS also offers education-assistance programs and an array of base-level community enhancement programs. Local family support centers can provide full details on programs and eligibility.

— The Air Force Enlisted Men's Widows and Dependents Home Foundation Inc. The foundation, located in Fort Walton Beach near Eglin Air Force Base, Fla., provides rent subsidy and other support to indigent widows and widowers of retired enlisted people. Those eligible to use the home are widows and widowers, age 55 and older, whose spouses were retired enlisted persons from the regular Air Force, Air National Guard or Air Force Reserve.

— The Air Force Village Indigent Widow's Fund. The village, located in San Antonio, is a life-care community for retired officers, spouses, widows or widowers and family members. Their indigent widow's fund provides support to widows and widowers of Air Force officers.

— The General and Mrs. Curtis E. LeMay Foundation. The LeMay foundation provides rent and financial assistance to indigent officer and enlisted widows or widowers in their own home and community. This foundation is for all indigent widows or widowers who do not want to, or are unable to move to one of the retirement homes.

Donations to the AFAF campaign can be made through cash or check contributions or payroll deduction.

Contributors may designate their contributions to one or more of the four charities, and 100 percent of their AFAF contribution is passed to their chosen charities. Contributions to the AFAF are deductible for federal income tax purposes as an itemized deduction.

For more information call Boswell at 782-5128 or Staff Sgt. Michael Chavez at 782-4136.

(Information courtesy of Air Force Personnel Center News Service)

Child Dental Health Month

Dentists raise awareness of children's teeth

By Capt. Jo Vu

8th Medical Group Dental Flight

From infancy to late teens, your children's dental health should be an important priority for you, even though you are away at the "Kun." The first baby or primary teeth come in at 6 to 10 months of age. The little front teeth are very vulnerable to developing cavities. These teeth should be cleaned after meals with a clean, moist cloth.

Similarly, when a baby is put to bed with a bottle of mild formula or juice, the sugars in these beverages will cause widespread and severe cavities. If a child needs a bottle to go to sleep, it should contain only water. Sugar in the human diet is converted to acid by bacteria, which normally lives in our mouths. This acid quickly erodes the enamel and dentin of teeth and will continue unabated into the nerve of the tooth unless the decay is removed and a filling placed.

Most children's dentists recommend that children have their first appointment sometime during their first year of life, usually after several teeth have erupted into the mouth. An appointment then will allow the dentist to assess any tendencies towards early decay and also to establish a friendly, trusting relationship between the child and dentist.

Fluoride is beneficial to the health of teeth. At the proper levels, fluoride exposure through diet and topical application will decrease 50 percent of the number of cavities a child ultimately develops. However, is there such a thing as too much of a good thing? Too much fluoride exposure in the developmental years from birth to 10 years of age may result in unattractive white splotches, known as fluorosis, develop-

ing on the surfaces of the teeth.

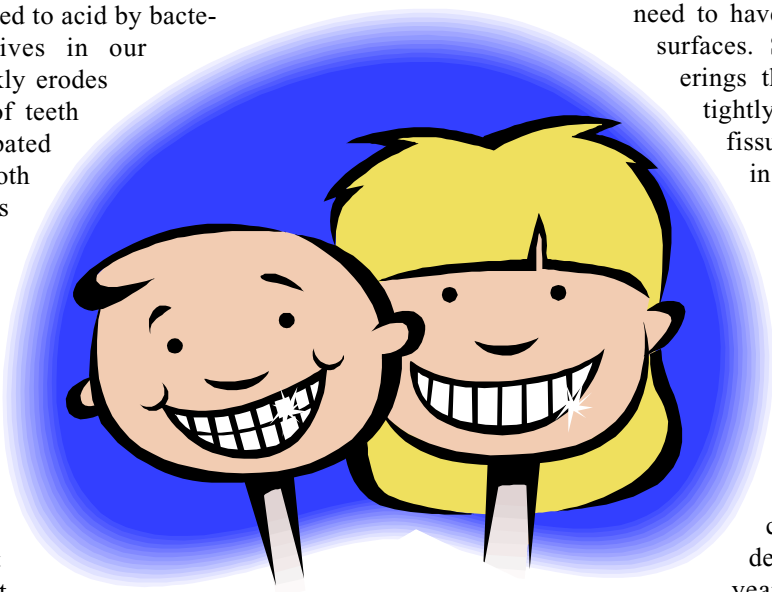
The dentist will take local water fluoridation levels into consideration and then make recommendations for brushing, flossing and supplementation guidelines. Typically, a child should have his or her teeth brushed twice a day with a small pea-sized amount of toothpaste, at least one time by a parent. After the parent has assisted the brushing, the child may be allowed to imitate and attempt to brush his or her own teeth.

At age 6, the first permanent or adult teeth begin to erupt. In the back of the mouth the "6-year molars" come in. These are important because they help to shape the face as well as affect the position of the other permanent teeth. Early after eruption, these teeth are susceptible to decay and may need to have sealants placed on the top surfaces. Sealants are hard plastic coverings that cement themselves very tightly into the pits, grooves and fissures of back teeth. By filling in these grooves, sealants prevent debris being trapped and therefore prevent decay.

By age 12, all of the permanent teeth, with the exception of the wisdom teeth, have erupted into the mouth and all the baby teeth have been lost. Special care must be paid to good hygiene for your child's teeth because most decay occurs during the teen years. Likewise, orthodontic treatment (braces) is usually initiated while the child is a teen. Wisdom teeth, or third molars, usually appear around ages 17 or 18. They may be impacted and require extraction.

In all stages, it is important to teach your child to maintain good dental habits and dental care. Daily flossing, brushing at least twice a day and regular trips to your family dentist will preserve your child's teeth for a lifetime.

For advice concerning your family's or your own dental inquiries, call the 8th Medical Group Dental Clinic at 782-4943.



Board announces lieutenant colonels

RANDOLPH AIR FORCE BASE, Texas (AFPC) — The calendar year 2000A Central Line, Judge Advocate General, Chaplain, Medical Service Corps, Nurse Corps, and Biomedical Sciences Corps lieutenant colonels boards selected 1,511 officers for promotion to lieutenant colonel.

The following Kunsan Air Base Wolf Pack majors are lieutenant colonel selects:

Billy Cecil II, 8th Medical Support Squadron; Michael Connolly, 8th Operations Support Squadron; Kerri Cole, 8th Services Squadron; Mark Hawley, 8th Supply Squadron; Tamara Holder and Steven Thompson, 8th Fighter Wing; Raymond Sable, 8th Civil Engineer Squadron; and Dennis Simpson, 8th Communications Squadron.

The lieutenant colonel selection boards convened at Randolph AFB Nov. 28 to consider 9,261 majors for promotion. The results of the boards are as follows:

Selection statistics in-the-promotion zone for lieutenant colonel:

Line — 1,118 officers selected from 1,718 considered for a 65.1 percent select rate;

JAG — 33 officers selected from 45 considered for a 73.3 percent select rate;

CHAP — 21 officers selected from 36 considered for a 58.3 percent select rate;

MSC — 28 officers selected from 37 considered for a 75.7 percent select rate;

NC — 67 officers selected from 125 considered for a 53.6 percent select rate; and,

BSC — 60 officers selected from 87 considered for a 69.0 percent select rate.

Selection statistics above-the-promotion zone for lieutenant colonel:

Line — 43 officers selected from 1,946 considered for a 2.2 percent select rate;

JAG — 1 officer selected from 46

considered for a 2.2 percent select rate;

CHAP — 1 officer selected from 19 considered for a 5.3 percent select rate;

MSC — 0 officers selected from 11 considered for a 0.0 percent select rate;

NC — 5 officers selected from 80 considered for a 6.3 percent select rate; and,

BSC — 1 officer selected from 57 considered for a 1.8 percent select rate.

Selection statistics below-the-promotion zone lieutenant colonel:

Line — 128 officers selected from 4,280 considered for a 3.0 percent select rate;

JAG — 0 officers selected from 121 considered for a 0.0 percent select rate;

CHAP — 0 officers selected from 0 considered for a 0.0 percent select rate;

MSC — 2 officers selected from 98 considered for a 2.0 percent select rate;

NC — 3 officers selected from 360 considered for a 0.8 percent select rate; and,

BSC — 0 officers selected from 195 considered for a 0.0 percent select rate.